MINING	APPLICATION	
NO.		

Date

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING 1588 West North Temple Salt Lake City, Utah 84116



NOTICE OF INTENTION TO COMMENCE MINING OPERATIONS
(See Rule M of General Rules and Regulations)

1.	Name of Applicant or Company Corporation (xx) Name of Applicant or Company Corporation (xx) Partnership () Individual ()
2.	
	rermanent Temporary
3.	Name and title of person representing company Robert L. Steele, Conslutant
4.	Address 1075 North 400 East, Nephi, Office Phone 623-1877
5.	Location of Operation Beaver Sec. 847 T. 29 S R. 13 W County
6.	Name of Mine White Mountain
7.	Mining method: () Coal () Flagstone () Copper () Gravel () Manganese () Shale () Iron Ore () Uranium () Phosphate () Gilsonite () Potash () Bituminous Sandstone () Fluorspar () Tungsten (xx) Other (specify) clay
8.	Have you or any person, partnership or corporation associated with you received an approved Notice of Intention to Commence Mining Operations by the State of Utah for operations other than described herein? (χ) Yes () No If yes, list all approval numbers now under surety:
	ACT/043/002 ACT/049/002
	ACT/049/007 ACT/035/003
	ACT/003/004
9.	Owner/Owners of record of the surface area within the land to be affected: Interstate Brick (Henry Schoo Lease) Address 9210 S. 5200 W., West Jordan
	Address
	Address
	Address

T to make the Design	Add	ress 421	10 5 5200	W Wast	Tordan	
Interstate Brick						
	Add	ress	·			
	Add	ress				
	Add	ress				
Owner/Owners of record of all affected:	other minerals	within	any part o	of the la	nd	
None	Add	ress				
	Ado	lress	·			
Have the above owners been no		.ng?				
Source of Operator's legal ri be covered by the Notice <u>Lea</u>						
Approximate acreage to be dis	turbed:	ten	acr	es		
Mining Operation Area: (include operations, storage			acres			
Access Road or Haulageway: use		ng	acres +			
Drainage System:	0		acres			
Total Acres:	10		Acres			
Give the names and post office addresses of every principal Executive, Officer Partner, (or person performing a similar function) of Applicant:						
Name:	Title:		Α	ddress:		
a. Harold P. Cahoon	President/Gene	ral Mgr.	9210 S.	5200 W	West Jordan	
b. Harvey P. Cahoon	Assistant Gene	ral Mgr.	9210 S.	5200 W.,	West Jordan	
c						
d.						
Has Applicant, any subsidiary association, trust, or corpor with Applicant, or any person had an approval of a Notice of	or affiliate ration controll required to bof Intention wi	or any pe ed by or e identi: thdrawn	erson, par under com fied by It or has sur	mon contr em 14, ev ety relat	rol ver	
thereto ever been forfeited?	()	Yes	(KXEX) N	io		

STATE OF UTAH
COUNTY OF
I,Robert L. Steele, having been duly sworn
depose and attest that all of the representations contained in the foregoing
application are true to the best of my knowledge; that I am authorized to
complete and file this application on behalf of the Applicant and this
application has been executed as required by law. Signed: Signed:
Taken, subscribed and sworn to before me the undersigned authority
in my said county, this 16th day of January , 19 80.
My Commission Expires: 12/29/82